1-800-325-8506

Austin, Texas 78711-2070

| 1 | NDIDATE / OFFICEHOLD INANCE REPORT | DER 7265 | FORM JC/OH COVER SHEET PG 1 |
|---|--|--|---|
| The JC/OH Instruction G | Guide explains how to complete this form. | 1 ACCOUNT# (Ethics Commission filers) 00065943 | 2 Total pages filed: |
| 3 CANDIDATE / OFFICEHOLDER | MS / MRS / MR FIRST | МІ | OFFICE USE ONLY |
| NAME | Mrs. Amy | Clark | Date Received |
| | NICKNAME LAST Meachum | SUFFIX | |
| 4 CANDIDATE / OFFICEHOLDER | ADDRESS / PO BOX; APT / SUITE #. C | ITY, STATE; ZIP CODE | |
| MAILING ADDRESS | 5103 Cedro Trl | | Date Hand-delivered or Date Postmarked |
| Change of Address | Austin, Texas, 78731 | | (|
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER (512) 7955032 | EXTENSION | Receipt # Amount |
| | MS / MRS / MR FIRST | MI | — Date Processed |
| 6 CAMPAIGN TREASURER NAME | Mr. David | 1841 | Date Imaged |
| | NICKNAME LAST Hilgers | SUFFIX | |
| 7 CAMPAIGN TREASURER ADDRESS | STREET ADDRESS (NO PO BOX PLEASE); APT / SUI 111 Congress Ave. Ste. 1400 Austin, Texas, 78701 | TE#; CITY; STATE; | ZIP CODE |
| (Residence or business) 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER (512) 703-5739 | EXTENSION | |
| 9 REPORTTYPE | January 15 🗶 30th day before election | n Runoff | 15th day after campaign treasurer appointment (officeholder only) |
| | July 15 8th day before election | Exceeded \$500 limit | Final report (Attach C/OH - FR) |
| 10 PERIOD COVERED | Month Day Year THROU | Month Day JGH 1 / 21 | Year / 2010 |
| 11 ELECTION | Month Day Year ELECTION TYPE 3 2 2010 X Primary | Runoff | General Special |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (If know | vn) |
| 14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE | Direct campaign expenditures are campaign exper Candidates are required to disclose this information or | | |
| BY OTHER INDIVIDUALS | Name | | |
| | Address / PO Box; Apt. / Suite #; City; State; 2 | Zip Code | |
| additional pages | | | |
| | GO TO F | PAGE 2 | |

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

P.O. Box 12070

FORM JC/OH COVER SHEET PG 2

| 15 C/OH NAME Amy Meachum | | 1 | 16 ACCOUNT # (Ethics Commission Filers) 00065943 |
|--------------------------------|---|--|---|
| 17 NOTICE FROM POLITICAL | candidate / officehol | notice of political contributions accepted or political expenditures madider. These expenditures may have been made without the candidate ceholders are required to report this information only if they receive n | 's or officeholder's knowledge or consent. |
| COMMITTEE(S) | COMMITTEE TYPE | COMMITTEE NAME | |
| | GENERAL | COMMITTEE ADDRESS | |
| | \$PECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | |
| additional pages | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 18 CONTRIBUTION TOTALS | | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAI ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE | |
| | | POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 19060.00 |
| EXPENDITURE 3. TOTAL TOTALS | | POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEM | \$ 0.00 |
| | 4. TOTAL | POLITICAL EXPENDITURES | \$ 16219.39 |
| CONTRIBUTION BALANCE | | POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST REPORTING PERIOD | \$ 42878.83 |
| OUTSTANDING LOAN TOTALS | | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | |
| | UMJON LEE FORBES COMMISSION EXPIRES May 6, 2012 | true and correct and includes all in under Title 15, Election Code. | f perjury, that the accompanying report is information required to be reported by me indidate or Officeholder |
| AFFIX NOTARY STA | NP / SEAL ABOVE | Ana Mark Manalan | 1 |
| Sworn to and subscrib | : A | the said | , this the day |
| Signalure of officer admir | L AND histering oath | Print name of officer administering oath | notary public |

SCHEDULE A (J)

(512) 463-5800

| · · · · · · · · · · · · · · · · · · · | | | | |
|---------------------------------------|--|------------------------|---------------------------------------|--------------------------------|
| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Sche | |
| 2 FILER NAME | | | 3 ACCOUNT # (Eth | |
| Amy Meachu | | | 0006 | 55943 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# | | 7 Amount of | 8 In-kind contribution |
| 4 Bale | | | contribution (\$) | description(if applicable) |
| | Tanya Elizabeth Gripton | | 1 | |
| 1/5/2010 | 6 Contributor address; City; State; Zip Code | | 20.00 | |
| | 3018 S 1st St #215 | | l | |
| | Austin, TX 78704 | | /16 t-avalt-i-d- | of Tours complete Cabadala Ti |
| 9 Contributor's p | rincipal occupation | 10 Contributor's job t | | of Texas, complete Schedule T) |
| Legislative A | · · · · · · · · · · · · · · · · · · · | io deliminato, diene | | |
| 11 Contributors e | · • | 12 Law firm of contrib | outor's spouse (if any | () |
| | as House of Representatives | ···· | | |
| 13 If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution |
| | Zachariah Evans | | contribution (\$) | description(if applicable) |
| | | | i | |
| 1/5/2010 | Contributor address; City; State; Zip Code | | 25.00 | |
| | 6136 Seville Dr. | | , | |
| | Austin, TX 78724 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's p Student | rincipal occupation | Contributor's job t | itle | |
| | nployer/law firm | Law firm of contrib | outor's spouse (if any | 1) |
| n/a | | | | |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution |
| | Jan Soifer | | contribution (\$) | description(if applicable) |
| 1 /5 /2010 | Contributor address; City; State; Zip Code | | | |
| 1/5/2010 | | | 250.00 | |
| | 5408 Hurlock Drive | | ĺ | |
| | Austin, TX 78731 | | · · · · · · · · · · · · · · · · · · · | of Texas, complete Schedule T) |
| Contributor's pr lawyer | incipal occupation | Contributor's job ti | itle | |
| Contributor's er Baron & Bude | nployer/law firm | Law firm of contrib | outor's spouse (if any | ') |
| | | | | |

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SCHEDULE A (J)

| The Instruction Guide explains how to complete this form. | = | 1 Total pages Sche | |
|--|-----------------------|-------------------------------|---|
| 2 FILER NAME | | 3 ACCOUNT# (Et | · |
| Amy Meachum | | 000 | 65943 |
| 4 Date 5 Full name of contributorout-of-state PAC (ID# |) | 7 Amount of contribution (\$) | 8 In-kind contribution description(if applicable) |
| Elisabeth McKetta | | CONTRIBUTION (W) | (acsomption(ii applicable) |
| 1/5/2010 6 Contributor address; City; State; Zip Code | | 15.00 | } |
| 5320 Balcones | • | 15.00 | |
| Austin, TX 78731 | | | |
| | | | of Texas, complete Schedule T) |
| 9 Contributor's principal occupation teacher/writer | 10 Contributor's job | title | |
| 11 Contributor's employer/law firm | 12 Law firm of contri | butor's spouse (if an | y) |
| St Stephen's School | | | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date Full name of contributorout-of-state PAC (ID#:_ |) | Amount of | In-kind contribution |
| John Owen | | contribution (\$) | description(if applicable) |
| 1/5/2010 Contributor address; City; State; Zip Code | • • • • • • • • • • | 100.00 | |
| 100 West 93rd 20H | | | |
| New York, NY 10025 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's principal occupation Attorney | Contributor's job | title | |
| Contributor's employer/law firm Jones Day | Law firm of contril | butor's spouse (if an | y) |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date Full name of contributor out-of-state PAC (ID#:_ | | Amount of | In-kind contribution |
| Christin Goolsby Livesay | | contribution (\$) | description(if applicable) |
| 1/6/2010 Contributor address; City; State; Zip Code | | 75.00 |] [|
| 1709 Newfield Lane | | | ` ! |
| Austin, TX 78703 | | (if travel outside | of Texas, complete Schedule T) |
| Contributor's principal occupation Attorney | Contributor's job t | title | |
| Contributor's employer/law firm Bishop London & Dodds, PC | Law firm of contril | outor's spouse (if any | у) |
| If contributor is a child, law firm of parent(s) (if any) | <u>.</u> | | |

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SCHEDULE A (J)

| The Instructi | ion Guide explains how to complete this form. | 1 Total pages Schedule A(J). 3 of 19 |
|--------------------------------|---|---|
| 2 FILER NAME | = | 3 ACCOUNT # (Ethics Commission filers) |
| Amy Meacht | ım | 00065943 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# Craig Needham | 7 Amount of 8 In-kind contribution contribution (\$) description(if applicable) |
| 1/6/2010 | 6 Contributor address; City; State; Zip Code 1960 The Alameda, #210 San Jose, CA 95126 | 250.00 |
| ··· | | (If travel outside of Texas, complete Schedule T) |
| 9 Contributor's p Lawyer | principal occupation | 10 Contributor's job title |
| 11 Contributor's e | employer/law firm Kepner, Fish & Jones, LLP | 12 Law firm of contributor's spouse (if any) |
| | s a child, law firm of parent(s) (if any) | |
| Date | Full name of contributor out-of-state PAC (ID# | |
| 1/6/2010 | Linda Jene Burgess Contributor address; City; State; Zip Code 4401 Shoal Creek Austin, TX 78701 | 100.00 |
| Contributor's p | rincipal occupation | Contributor's job title |
| Contributor's e Winstead PC | mployer/law firm | Law firm of contributor's spouse (if any) |
| - | s a child, law firm of parent(s) (if any) | |
| Date | Full name of contributor out-of-state PAC (ID# Michael Jacob Whellan | |
| 1/8/2010 | Contributor address; City; State: Zip Code 4600 Laurel Canyon Dr. | 150.00 |
| | Austin, TX 78731 | (If travel outside of Texas, complete Schedule T) |
| Contributor's p Attorney | rincipal occupation | Contributor's job title |
| | mployer/law firm Jherty Hearon & Moody, PC | Law firm of contributor's spouse (if any) |
| If contributor is | a child, law firm of parent(s) (if any) | |

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POLITICAL CONTRIBUTIONS

SCHEDULE A (J)

1-800-325-8506

| OTHER | THAN PLEDGES OR LOANS | S (JUDICIAI | _) | |
|---------------------------------|--|--------------------------------|-----------------------------|---|
| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Sche | |
| 2 FILER NAME | - | | 3 ACCOUNT# (Ett | |
| Amy Meacht | - Jm | | 0000 | 65943 |
| 4 Date | 5 Full name of contributor Out-of-state PAC (ID# | 1 | 7 Amount of | 8 In-kind contribution |
| | Christine F Miller | | contribution (\$) | description(if applicable) |
| 1/8/2010 | 6 Contributor address; City: State; Zip Code 8217 Cobblestone | | 100.00 | - |
| | Austin, TX 78735 | | (If travel outside | of Texas, complete Schedule T) |
| 1 . | rincipal occupation | 10 Contributor's job | title | |
| Attorney 11 Contributor's e | mplover/law firm | 12 Law firm of contri | butor's spouse (if an | v) |
| 1 | ochridge & Kilgore, L.L.P. | 12 220 1111 0 001121 | | |
| 13 If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributorout-of-state PAC (ID#: Lee Legault |) | Amount of contribution (\$) | In-kind contribution description(if applicable) |
| 1/11/2010 | Contributor address; City; State; Zip Code | | 100.00 | } |
| | 9809 Llano Estacado Lane | | | |
| | Austin, TX 78759 | | | of Texas, complete Schedule T) |
| Contributors p Lawyer | rincipal occupation | Contributor's job associate | title | |
| Contributor's e Reeves & Bri | mployer/law firm ghtwell | Law firm of contri | butor's spouse (if an | y) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributorout-of-state PAC (ID# Dan Richards |) | Amount of contribution (\$) | In-kind contribution description(if applicable) |
| 1/11/2010 | Contributor address; City; State; Zip Code | | 100.00 | |
| | 1403 kent lane | | | 1 1 |
| | austin, TX 78703 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's praction | rincipal occupation | Contributor's job Partner | title | |
| | nployer/law firm Iriguez and Skeith | | butor's spouse (if any | y) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |

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| SCHEDULE A | ١ 🖈 | J |
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(512) 463-5800

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| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Sche 5 of 1 | |
| 2 FILER NAME | = | | 3 ACCOUNT # (Ett | hics Commission filers) |
| Amy Meachu | m | | 0000 | 65943 |
| 4 Date | 5 Full name of contributor | | 7 Amount of | 8 In-kind contribution |
| | Aimee B Boone | | contribution (\$) | description(if applicable) |
| 1/12/2010 | 6 Contributor address; City; State; Zip Code | | 1000.00 | 1 |
| 1,12,20.0 | 902 Ethel Street | | | |
| | Austin, TX 78704 | | (If traval outside | of Texas, complete Schedule T) |
| 9 Contributor's p | I rincipal occupation | 10 Contributor's job | | or rexas, complete schedule 1) |
| <u>Developmer</u> | nt Director | Development | Director | |
| 11 Contributor's e | | 12 Law firm of contri | butor's spouse (if an | y) |
| Texas Demo | a child, law firm of parent(s) (if any) | | , | |
| | | | | <u></u> |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of | In-kind contribution |
| | joe k crews | | contribution (\$) | description(if applicable) |
| 1/13/2010 | Contributor address; City; State; Zip Code | | 500.00 | 1 |
| 17 13/2010 | 1606 rockmoor | ĺ | , 300.00 | |
| ĺ | austín, TX 78703 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's pi | rincipal occupation | Contributor's job owner | title | |
| Contributor's er crews law fir | mployer/law firm M, p.c. | Law firm of contril | butor's spouse (if an | у) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution |
| | Becky Beaver | | contribution (\$) | description(if applicable) |
| 1/13/2010 | Contributor address; City; State; Zip Code | | 100.00 | |
| | 4601 Bull Creek Road | | | |
| | Austin, TX 78731 | | (if travel outside | of Texas, complete Schedule T) |
| | rincipal occupation | Contributor's job | | |
| Legal | | Attorney at Lav | | · · · · · · · · · · · · · · · · · · · |
| | nployer/law firm Becky Beaver | Law 11rm of contrib | butor's spouse (if any | y) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |

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P.O. Box 12070

SCHEDULE A (J)

(512) 463-5800

| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Sche | |
|----------------------|---|-----------------------|------------------------|--------------------------------|
| 2 FILER NAME | | | 3 ACCOUNT # (Eti | hics Commission filers) |
| Amy Meacht | um | | 0000 | 65943 |
| 4 Date | 5 Full name of contributorout-of-state PAC (ID# |) | 7 Amount of | 8 In-kind contribution |
| | Kell C. Mercer | | contribution (\$) | description(if applicable) |
| 1/12/2010 | 6 Contributor address; City; State; Zip Code | | 500.00 | |
| 1/13/2010 | 9221 Hopeland Drive | | 500.00 | |
| | Austin, TX 78749 | | | |
| 9 Contributor's p | principal occupation | 10 Contributor's job | | of Texas, complete Schedule T) |
| Attorney | micipal occupation | Partner | ınıe | |
| 11 Contributor's e | • • | 12 Law firm of contri | butor's spouse (if an | y) |
| Brown McCa | | | | |
| 13 if contributor is | s a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of | in-kind contribution |
| | Carleton A. Davis | | contribution (\$) | description(if applicable) |
| 4 (4 2 (2 4 4 | Contributor address; City; State; Zip Code | | | |
| 1/13/2010 | 1808 Watchhill Road | | 100.00 | |
| | Austin, TX 78703 | | | l |
| Contributor's n | rincipal occupation | Contributor's job | | of Texas, complete Schedule T) |
| Attorney | molpar occupation | Partner | uue | |
| | mployer/law firm | Law firm of contrib | outor's spouse (if an | y) |
| Brown McCa | | - | | |
| ir contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor |) | Amount of | In-kind contribution |
| | stacey reese | | contribution (\$) | description(if applicable) |
| 1/13/2010 | Contributor address; City; State; Zip Code | | 100.00 | |
| ., | 2405 w. 9th st | | 100.00 | |
| | austin, TX 78703 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's pr | rincipal occupation | Contributor's job t | | , , |
| laywer | | lawyer | | |
| | nployer/law firm chridge, & Kilgore | Law firm of contrib | outor's spouse (if any | y) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |

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SCHEDULE A (J)

| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Scho | • • |
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| 2 FILER NAMI | | | 3 ACCOUNT # (Et | hics Commission filers) |
| Amy Meachi | m | | 000 | 65943 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# |) | 7 Amount of contribution (\$) | 8 In-kind contribution description(if applicable) |
| 1/13/2010 | 6 Contributor address; City; State; Zip Code 3707 Laurel Ledge Lane Austin, TX 78731 | | 500.00 | |
| 9 Contributor's p | principal occupation | 10 Contributor's job | | of Texas, complete Schedule T) |
| Attorney | , mapa cooquatori | Partner | | |
| 11 Contributor's e | mployer/law firm ert, Robertson & Flores, LLP | 12 Law firm of contril | butor's spouse (if an | у) |
| | s a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |): | Amount of | In-kind contribution |
| | Bo Blackburn | | contribution (\$) | description(if applicable) |
| 1/14/2010 | Contributor address; City; State; Zip Code | | 250.00 | |
| | 2301 S. Capital of Texas Highway Bldg. H | | | |
| | Austin, TX 78746 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's p Attorney | rincipal occupation | Contributor's job t Partner | title | |
| | mployer/law firm ackburn & Dickie | Law firm of contril Almanza, Black | butor's spouse (if an burn & Dickie | у) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of | In-kind contribution |
| | Karen Watkins | | contribution (\$) | description(if applicable) |
| 1/14/2010 | Contributor address; City; State; Zip Code | | 500.00 | 1 |
| | 9005 Heiden Lane | | | , |
| | Austin, TX 78749 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's p | rincipal occupation | Contributor's job t Partner | title | |
| | mployer/law firm chridge & Kilgore, LLP | Law firm of contrib | outor's spouse (if an | у) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| | • | | | |

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| 2 FILER NAM | E | | 3 ACCOUNT # (Et | hics Commission filers) |
| Amy Meach | um | | 000 | 65943 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of | 8 In-kind contribution |
| | Karen L. Watkins | | contribution (\$) | description(if applicable) |
| 1/15/2010 | 6 Contributor address; City, State; Zip Code | | 500.00 | |
| | 9005 Heiden Lane | | | |
| | Austin, TX 78749 | | (If the state in the interior | of Tough complete Schoolule Th |
| 9 Contributor's | principal occupation | 10 Contributor's job | · | of Texas, complete Schedule T) |
| Lawyer | <u>'</u> | Partner | | |
| 11 Contributor's a | employer/law firm ochridge & Kilgore, LLP | 12 Law firm of contri | butor's spouse (if an | у) |
| | s a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributorout-of-state PAC (ID#: |) | Amount of | In-kind contribution |
| | Christin Goolsby Livesay | | contribution (\$) | description(if applicable) |
| 1/15/2010 | Contributor address; City; State; Zip Code | | 100.00 | |
| | 1709 Newfield Lane | | | |
| | Austin, TX 78703 | | (if travel outside | of Texas, complete Schedule T) |
| Contributor's p | principal occupation | Contributor's job Associate | title | |
| | mployer/law firm | | butor's spouse (if an | y) |
| Bishop Lond | lon & Dodds, PC | | · | |
| If contributor is | s a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of | In-kind contribution |
| | Amanda Garrett Taylor | İ | contribution (\$) | description(if applicable) |
| 1/15/2010 | Contributor address; City; State; Zip Code | | 250.00 | |
| | 6512 Rotan Dr. | | | <u> </u> |
| | Austin, TX 78749 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's p attorney | rincipal occupation | Contributor's job t Associate | title | |
| | mployer/law firm aube, & Summers, LLP | Law firm of contril n/a | butor's spouse (if an | у) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |

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| The Instruc | tion Guide explains how to complete this form. | | 1 Total pages Sche 9 of 19 | , , |
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| 2 FILER NAM | IE | | 3 ACCOUNT # (Eth | ics Commission filers) |
| Amy Meach | um | | 0006 | 55943 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: | | 7 Amount of | 8 In-kind contribution |
| | Matt Dow | | contribution (\$) | description(if applicable) |
| 1/15/2010 | 6 Contributor address; City; State; Zip Code | | 500.00 | |
| 171372010 | 100 Congress Ave., Suite 1100 | | 500.00 | |
| | Austin, TX 78701 | | 1 | |
| 9 Contributor's | principal occupation | 10 Contributor's job | <u> </u> | of Texas, complete Schedule T) |
| Lawyer | principal occupation | Lawyer | uue | |
| 11 Contributor's | employer/law firm | 12 Law firm of contri | butor's spouse (if any | /) |
| Jackson W | | | | |
| 13 If contributor | is a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of | In-kind contribution |
| | Christine F Miller | | contribution (\$) | description(if applicable) |
| 1/18/2010 | Contributor address; City; State; Zip Code | | 100.00 | |
| 1710/2010 | 8217 Cobblestone | | 100.00 | |
| | Austin, TX 78735 | j | (If travel outside | of Texas, complete Schedule T) |
| Contributor's | principal occupation | Contributor's job | | or revue, complete conduits 17 |
| Attorney | | Partner | | 7 |
| | employer/law firm ochridge & Kilgore, L.L.P. | Law firm of contri | butor's spouse (if any | ·) |
| If contributor | s a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor Out-of-state PAC (ID# |) | Amount of | In-kind contribution |
| | Adam Loewy | | contribution (\$) | description(if applicable) |
| 1/18/2010 | Contributor address; City; State; Zip Code | | 500.00 | |
| 17 10/2010 | 401 Congress Avenue Suite 1540 | | 300.00 | |
| | Austin, TX 78701 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's | Drincipal occupation | Contributor's job | | or ready complete conductory |
| Lawyer | | Partner | | |
| Contributor's e Barry & Loe | employer/law firm NY LLP | Law firm of contrib | outor's spouse (if any | ') |
| If contributor i | s a child, law firm of parent(\$) (if any) | | | |
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| 2 | FILER NAME | Ξ | | | 3 ACCOUNT# (EIF | ncs Commission filers) | |
| | Amy Meachu | ım | | | 0006 | 55943 | |
| 4 | Date | 5 | Full name of contributor out-of-state PAC (ID# |) | 7 Amount of | 8 In-kind contribution | |
| | | | Gerard L Torres | | contribution (\$) | description(if applicable) | |
| | | | | | | | |
| | 1/18/2010 | 8 | Contributor address; City; State; Zip Code | | 250.00 | | |
| | | | 5218-A McCarty | | | | |
| | | | Austin, TX 78749 | | (If travel outside | of Texas, complete Schedule T) | |
| 9 | Contributor's p Government | | ipal occupation ffairs | 10 Contributor's job to Director | title | | |
| 11 | Contributor's e | | | 12 Law firm of contrib N/A | outor's spouse (if any | /) | |
| 13 | If contributor is | ac | child, law firm of parent(s) (if any) | | | | |
| | Date | | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution | |
| | | | Tyler James Rudd | | contribution (\$) | description(if applicable) | |
| 1 | 1/18/2010 | | Contributor address; City; State; Zip Code | , | 100.00 | | |
| | | | 4006 Brandi Court | | | | |
| | | | Austin, TX 78759 | | (If travel outside | of Texas, complete Schedule T) | |
| | Contributor's pr Attorney | inc | ipal occupation | Contributor's job t Attorney | itle | | |
| | Contributor's er Self | mpl | oyer/law firm | Law firm of contrib Dechert | ibutor's spouse (if any) | | |
| | If contributor is | ас | hild, law firm of parent(s) (if any) | | | | |
| | Date | | Full name of contributorout-of-state PAC (ID#: |) | Amount of | In-kind contribution | |
| | | | Amy Lynne Rudd | | contribution (\$) | description(if applicable) | |
| | 1/10/2010 | | Contributor address; City; State; Zip Code | | 10000 | | |
| | 1/18/2010 | | 4006 Brandi Court | | 100.00 | | |
| | | | | } | + | | |
| | Contributada | in a | Austin, TX 78759 | Contributed at 111 | | of Texas, complete Schedule T) | |
| | Contributor's pr Attorney | it IC | рагоссираціоп | Contributor's job t Associate | nie | | |
| | Contributor's en Dechert LLP | nple | oyer/law firm | | outor's spouse (if any |) | |
| | If contributor is | a cl | nild, law firm of parent(s) (if any) | | | | |

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SCHEDULE A (J)

| The Instruction | The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A(J): 11 of 19 | | |
|--|--|---------------------------------------|-------------------------------|--|--|--|
| 2 FILER NAME | | | 3 ACCOUNT# (Ett | nics Commission filers) | | |
| Amy Meachu | ım | | 0006 | 55943 | | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#* Edward P Martin | | 7 Amount of contribution (\$) | 8 In-kind contribution description(if applicable) | | |
| 1/19/2010 | 6 Contributor address; City; State; Zip Code 1307 Barton Hills Dr. Apt. 8 | | 100.00 | <u> </u> | | |
| | Austin, TX 78704 | | (If travel outside | of Texas, complete Schedule T) | | |
| 9 Contributor's p Consultant | rincipal occupation | 10 Contributor's job to Communication | | | | |
| 11 Contributor's e Self | mployer/law firm | 12 Law firm of contrib | outor's spouse (if an | y) | | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | | | | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description(if applicable) | | |
| 1/19/2010 | Contributor address; City; State; Zip Code | | 500.00 | | | |
| | 911 Ottawa Dr. Austin, TX 78733 | | (If travel outside | of Texas, complete Schedule T} | | |
| Contributor's p | rincipal occupation | Contributor's job to president | title | | | |
| Contributor's e Mark Cramp | mployer/law firm ton, PC | Law firm of contrib | ibutor's spouse (if any) | | | |
| If contributor is | a child, law firm of parent(s) (if any) | | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of | In-kind contribution | | |
| | Mary A. Patrick | | contribution (\$) | description(if applicable) | | |
| 1/19/2010 | Contributor address; City; State; Zip Code | | 100.00 |] | | |
| | 612 Genard St. (US Mail: P.O. Box 303370 -78703 | | | | | |
| | Austin, TX 78751 | | (If travel outside | of Texas, complete Schedule T) | | |
| Contributor's principal occupation Contributor's ju Volunteer Retired | | Contributor's job t Retired | ob title | | | |
| Contributor's er Retired | mployer/law firm | Law firm of contrib | outor's spouse (if an | y) | | |
| If contributor is | a child, law firm of parent(s) (if any) | | | | | |

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Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Scho | , . |
|----------------------------------|--|---------------------------------|------------------------|--------------------------------|
| 2 FILER NAME | | | 3 ACCOUNT# (Ett | nics Commission filers) |
| Amy Meachu | ım | | 0000 | 55943 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# | | 7 Amount of | 8 In-kind contribution |
| | Jason Panzer | · | contribution (\$) | description(if applicable) |
| 1 (10 (2010 | 6 Contribute address City Code | | 100.00 | |
| 1/19/2010 | 6 Contributor address; City; State; Zip Code 7609 Fawnhollow Cv | | 100.00 | |
| | Austin, TX 78750 | | | |
| | | | <u> </u> | of Texas, complete Schedule T) |
| 9 Contributor's p Lawyer | rincipal occupation | 10 Contributor's job to Partner | title | |
| 11 Contributors e | | 12 Law firm of contril | butor's spouse (if an | y) |
| | noditch & Panzer, PC a child, law firm of parent(s) (if any) | | | - |
| 13 II COMMIDATORIS | a child, law lifth of parend(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID#: | } | Amount of | In-kind contribution |
| | Susannah Stinson | | contribution (\$) | description(if applicable) |
| 1/19/2010 | Contributor address; City; State; Zip Code 2107 Four Oaks Lane | | 100.00 | |
| : | | | | |
| | Austin, TX 78704 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's pr Attorney | rincipal occupation | Contributor's job t Attorney | title | |
| | mployer/law firm f Becky Beaver | Law firm of contrit | outor's spouse (if an | y) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID#; |) | Amount of | In-kind contribution |
| | Mary Schaerdel Dietz | | contribution (\$) | description(if applicable) |
| 1 (00 (0010 | Contributor address; City; State; Zip Code | | | |
| 1/20/2010 | • | | 1000.00 | |
| | 1900 Steamboat Springs Cove | | | |
| Contributor | Austin, TX 78746 | Cantala and a february | | of Texas, complete Schedule T) |
| Attorney | incipal occupation | Contributor's job t Partner | uue | |
| Contributor's er K&L Gates LL | nployer/law firm P | Law firm of contrib | outor's spouse (if any | () |
| If contributor is | a child, law firm of parent(s) (if any) | | | |

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P.O. Box 12070

SCHEDULE A (J)

| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Sche | • • | |
|--------------------------------|--|--------------------------------|---------------------------------------|---|--|
| 2 FILER NAME | | | 3 ACCOUNT# (Ett | nics Commission filers) | |
| Amy Meacht | ım | | 0006 | 55943 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# |) | 7 Amount of contribution (\$) | 8 In-kind contribution description(if applicable) | |
| | Justin Brooks Demerath | | , . | , | |
| 1/21/2010 | 6 Contributor address; City; State; Zip Code | | 500.00 | | |
| | 3802A Island Way | | | | |
| | Austin, TX 78746 | | | | |
| 9 Contributor's p | rincipal occupation | 10 Contributor's job | · · · · · · · · · · · · · · · · · · · | of Texas, complete Schedule T) | |
| Attorney | miliopal occupation | Partner | uue | | |
| 11 Contributor's e | · · · | 12 Law firm of contri | butor's spouse (if any | у) | |
| | IcCollom & Demerath | | | | |
| 13 If contributor is | s a child, law firm of parent(s) (if any) | | _ | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution | |
| Albert Lin | | contribution (\$) | description(if applicable) | | |
| 1/21/2010 | Contributor address; City; State; Zip Code 2506-B Wilson Street | | 50.00 | | |
| | | | | | |
| | Austin, TX 78704 | | (If travel outside | of Texas, complete Schedule T) | |
| Contributor's pi Attorney | rincipal occupation | Contributor's job t Partner | title | | |
| Contributor's ea Brown McCa | mployer/law firm rroll | Law firm of contrib | ibutor's spouse (if any) | | |
| If contributor is | a child, law firm of parent(s) (if any) | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of | In-kind contribution | |
| | Clark Richards | | contribution (\$) | description(if applicable) | |
| 1/4/2010 | Contributor address; City; State; Zip Code | | 150.00 | | |
| | 2104 Wright St. | | | | |
| | Austin, TX 78704 | | (If travel outside | of Texas, complete Schedule T) | |
| Contributor's pr Lawyer | incipal occupation | Contributor's job t Partner | iitle | | |
| | nployer/law firm riguez & Skeith | Law firm of contrib | outor's spouse (if any | <i>(</i>) | |
| If contributor is | a child, law firm of parent(s) (if any) | | | | |

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| The Instruction | on Guide explains how to complete this form. | | 1 Total pages Sche | • • |
|------------------------------------|--|----------------------------------|--|---|
| 2 FILER NAME | | | 3 ACCOUNT # (Ethics Commission filers) | |
| Amy Meachu | | | 0006 | 65943 |
| 4 Date | 5 Full name of contributorout-of-state PAC (ID# | | 7 Amount of contribution (\$) | 8 In-kind contribution description(if applicable) |
| 1/4/2010 | 6 Contributor address; City; State, Zip Code 5210 A Woodrow | | 75.00 | |
| | Austin, TX 78756 | | (If travel outside | of Texas, complete Schedule T) |
| 9 Contributor's p Executive Di | rincipal occupation irector | 10 Contributor's job | title | |
| 11 Contributor's e Center for C | mployer/law firm hild Protection | 12 Law firm of contrib | butor's spouse (if any | v) |
| 13 If contributor is | 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor Out-of-state PAC (ID#_ | } | Amount of | In-kind contribution |
| | Zeena Angadicheril | | contribution (\$) | description(if applicable) |
| 1/6/2010 | Contributor address; City; State; Zip Code | | 150.00 | - |
| | 401 Congress Avenue Suite 2100 | | | i I |
| | Austin, TX 78701 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's pr Lawyer | rincipal occupation | Contributor's job t Associate | title | |
| Contributor's er Winstead PC | mployer/law firm | Law firm of contrib | butor's spouse (if any | <i>(</i>) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution |
| | Sue Clark | | contribution (\$) | description(if applicable) |
| 1/7/2010 | Contributor address; City; State; Zip Code | | 2500.00 | 1 |
| | 210 Russell | | 1 | 1 |
| | Lorena, TX 76655 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's pr Retired | rincipal occupation | Contributor's job t | title | |
| Contributor's en Retired | nployer/law firm | Law firm of contrib | butor's spouse (if any | <i>'</i>) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |

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| The Instructi | ion Guide explains how to complete this form. | | 1 Total pages Sche | , , | |
|-----------------------------------|--|-------------------------|---|--------------------------------|--|
| 2 FILER NAME | | | 3 ACCOUNT # (Etr | hics Commission filers) | |
| Amy Meacht | | | 0006 | 65943 | |
| 4 Date | 5 Full name of contributor Out-of-state PAC (ID# |) | 7 Amount of | 8 In-kind contribution | |
| | Herring & Irwin, LLP | | contribution (\$) | description(if applicable) | |
| 1/13/2010 | 6 Contributor address; City; State; Zip Code | | 500.00 | 1 | |
| , ,,,,,,,,, | 701 Brazos Street, Suite 650 | | 1 | | |
| | Austin, TX 78701 | | | [| |
| | | | | of Texas, complete Schedule T) | |
| 9 Contributor's p | principal occupation | 10 Contributor's job t | itle | | |
| 11 Contributor's e | mployer/law firm | 12 Law firm of contrib | outor's spouse (if any | y) | |
| 13 If contributor is | 13 If contributor is a child, law firm of parent(s) (if any) | | | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution | |
| | Thomas Tynes | | contribution (\$) | description(if applicable) | |
| 1/14/2010 | Contributor address; City; State; Zip Code | | 50.00 | | |
| | 5480 Wisconsin Ave., Apt. 816 | | | | |
| | Chevy Chase, MD 20815 | | (If travel outside | of Texas, complete Schedule T) | |
| Contributor's p Law Student | principal occupation | Contributor's job t | | | |
| Contributor's er | mployer/law firm | Law firm of contrib | Law firm of contributor's spouse (if any) | | |
| | s a child, law firm of parent(s) (if any) | <u> </u> | | | |
| | | | | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution | |
| (| Lisa Blocker | | contribution (\$) | description(if applicable) | |
| 1/14/2010 | Contributor address; City; State; Zip Code | · · · · · · · · · · · · | | 1 | |
| 1/14/2010 | , · | | 250.00 | | |
| | 3509 Derbyshire Court | | | | |
| | Flower Mound, TX 75022 | | (If travel outside | of Texas, complete Schedule T) | |
| Contributor's pr VP for Public | rincipal occupation Affairs | Contributor's job ti | itle | | |
| Contributor's er Energy Futur | mployer/law firm re Holdings | Law firm of contrib | outor's spouse (if any | /) | |
| If contributor is | a child, law firm of parent(s) (if any) | | | | |

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SCHEDULE A (J)

| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J): 16 of 19 | | |
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| 2 FILER NAME | | | 3 ACCOUNT# (Et | |
| Amy Meacht | | | _ | 55943 |
| · · · · · · · · · · · · · · · · · · · | | | 7 Amount of | 8 In-kind contribution |
| 4 Date | 5 Full name of contributor Out-of-state PAC (ID#: | | contribution (\$) | description(if applicable) |
| | Tris Castaneda, Jr. | | | 1 |
| 1/14/2010 | 6 Contributor address; City; State; Zip Code | | 250.00 | |
| | 6100 Jumano Lane | | | |
| | Austin, TX 78749 | | 4154 | - (Tours and a Color of the Tours |
| 9 Contributor's p | principal occupation | 10 Contributor's job | <u> </u> | of Texas, complete Schedule T) |
| Lawyer | , maparoccapation | Lawyer | | |
| 11 Contributor's e Baker Botts | mployer/law firm | 12 Law firm of contril | butor's spouse (if an | y) |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | | |
| Date | Full name of contributor out-of-state PAC (ID# |) | Amount of | In-kind contribution |
| | Martha Dickie | | contribution (\$) | description(if applicable) |
| 1/14/2010 | Contributor address; City; State; Zip Code | | 250.00 | - |
| | 2301 S. Capital of Texas Highway | | | l . |
| | Austin, TX 78746 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's p Attorney | rincipal occupation | Contributor's job title Attorney | | |
| | mployer/law firm ackburn & Dickie | Law firm of contributor's spouse (if any) | | |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor out-of-state PAC (ID# | | Amount of | In-kind contribution |
| | Brian Bishop | | contribution (\$) | description(if applicable) |
| 1/14/2010 | Contributor address; City; State; Zip Code | | 500.00 | |
| | 115 Wild Basin Rd. Ste. 106 | | | ! |
| | Austin, TX 78746 | | (If travel outside | of Texas, complete Schedule T) |
| | rincipal occupation | Contributor's job t | title | |
| Attorney | | Attorney | | |
| Contributor's er Self | mployer/law firm | Law firm of contrit | outor's spouse (if an | y) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |

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| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Sche 17 of 1 | | |
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| 2 FILER NAME | = | | 3 ACCOUNT # (Eth | ucs Commission filers) | |
| Amy Meach | ım | | 0006 | 55943 | |
| 4 Date | 5 Full name of contributorout-of-state PAC (ID# | | 7 Amount of | 8 In-kind contribution | |
| | Akin Gump Strauss Hauer & Feld LLP | | contribution (\$) | description(if applicable) | |
| 1/14/2010 | 6 Contributor address; City; State; Zip Code | | 500.00 | | |
| 1/14/2010 | 300 West 6th Street, Suite 2100 | | 500.00 | | |
| | Austin, TX 78701 | | 1 | | |
| | <u></u> | | | of Texas, complete Schedule T) | |
| 9 Contributor's p | rincipal occupation | 10 Contributor's job t | title | | |
| 11 Contributor's e | mployer/law firm | 12 Law firm of contrib | outor's spouse (if any | /) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of | In-kind contribution | |
| | Byrd Davis Furman LLP | | contribution (\$) | description(if applicable) | |
| 1/15/2010 | Contributor address; City; State; Zip Code | , , , , , , , , , , | 1000.00 | | |
| 17 13/2010 | 707 W. 34th St. | | 1000.00 | | |
| | Austin, TX 78705 | | (If tenual putaido | ef Tourne someplete Schoolule Ti | |
| Contributor's p | rincipal occupation | Contributor's job t | | of Texas, complete Schedule T) | |
| | | | | | |
| Contributor's e | mployer/law firm | Law firm of contrib | Law firm of contributor's spouse (if any) | | |
| If contributor is | a child, law firm of parent(s) (if any) | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of | In-kind contribution | |
| · | Paul Labuda | | contribution (\$) | description(if applicable) | |
| 1/18/2010 | Contributor address; City; State; Zip Code | | 100.00 | | |
| | 2000 Delvin Lane | | | | |
| | Austin, TX 78728-8680 | | (If travel outside | of Texas, complete Schedule T) | |
| Contributor's principal occupation Contributo | | Contributor's job t | itle | | |
| Contributor's employer/law firm Law firm of contributor's s Visual Click Software, Inc. | | | outor's spouse (if any | · · · · · · · · · · · · · · · · · · · | |
| If contributor is | a child, law firm of parent(s) (if any) | | | | |

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SCHEDULE A (J)

(512) 463-5800

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| The Instruc | tion Guide explains how to complete this form. | | 1 Total pages Sche | edule A(J): |
| | | | 18 of 1 | 9 |
| 2 FILER NAM | E | | 3 ACCOUNT # (Ett | nics Commission filers) |
| Amy Meach | um | | 0006 | 55943 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# | | 7 Amount of contribution (\$) | 8 In-kind contribution description(if applicable) |
| | Michael Curry | | CONTRIBUTION (4) | description (in approache) |
| 1/18/2010 | 6 Contributor address; City; State; Zip Code | . , | 100.00 | |
| 17 10/2010 | 211 East Seventh St., Suite 920 | | 700.00 | |
| | Austin, TX 78701 | | | |
| O Contailly storily | | 40 Contile Andria | · | of Texas, complete Schedule T) |
| 9 Contributor's Attorney | principal occupation | 10 Contributor's job t Attorney | itie | |
| 11 Contributor's Self | employer/law firm | 12 Law firm of contrib | outor's spouse (if any | y) |
| 13 If contributor | is a child, law firm of parent(s) (if any) | | | |
| Date | Full name of contributor Out-of-state PAC (ID# |) | Amount of | In-kind contribution |
| | Whitehurst, Harkness, Brees & Cheng | | contribution (\$) | description(if applicable) |
| 1/18/2010 | Contributor address; City; State; Zip Code | | 1000.00 | |
| 17 1072010 | 5113 Southwest Parkway, Suite 150 | | 1000.00 | |
| | Austin, TX 78735 | | (If travel outside | of Texas, complete Schedule T) |
| Contributor's | principal occupation | Contributor's job t | itte | |
| Contributor's | employer/law firm | Law firm of contributor's spouse (if any) | | |
| If contributor i | s a child, law firm of parent(s) (if any) | 2001411 | | |
| Date | Full name of contributorout-of-state PAC (ID#: | , | Amount of | In-kind contribution |
| | Catherine Mauzy | | contribution (\$) | description(if applicable) |
| 1/18/2010 | Contributor address; City; State; Zip Code | | 1000.00 | |
| 1/18/2010 | 700 Lavaca Ste, 1150 | | 1000.00 | |
| | Austin, TX 78701 | | (If traval outside | of Texas, complete Schedule T) |
| | principal occupation | Contributor's job t | | c. rozas, complete ochequie 1) |
| Attorney | | Attorney | | |
| Contributor's e Self | employer/law firm | Law firm of contrib | outor's spouse (if any | ·) |
| If contributor i | s a child, law firm of parent(s) (if any) | | | |

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SCHEDULE A (J)

| The Instructi | on Guide explains how to complete this form. | | 1 Total pages Scho | |
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| 2 FILER NAME | = | | 3 ACCOUNT# (Eti | |
| Amy Meachu | - | | - | 55943 |
| | <u> </u> | | | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#' |) | 7 Amount of contribution (\$) | 8 In-kind contribution description(if applicable) |
| | Leslie Lemon | | | i 1 |
| 1/21/2010 | 6 Contributor address; City; State; Zip Code | | 250.00 | <u> </u> |
| | 2523 Winsted Ln. | | | |
| | Austin, TX 78703 | | (IF (1 | |
| 9 Contributor's p | rincipal occupation | 10 Contributor's job | · · · · · · · · · · · · · · · · · · · | of Texas, complete Schedule T) |
| Retired | mioparoccupation | 10 Contributor s job | uue | |
| 11 Contributor's e | mployer/law firm | 12 Law firm of contri | butor's spouse (if an | y) |
| Retired | | | | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of | In-kind contribution |
| | Jessica Palvino | | contribution (\$) | description(if applicable) |
| | | | | |
| 1/13/2010 | Contributor address; City; State; Zip Code | | 500.00 | <u>'</u> |
| | 4228 Threadgill St | | | |
| | Austin, TX 78723 | | (If travel outside | of Texas, complete Schedule T) |
| • | rincipal occupation | Contributor's job title | | |
| Attorney | mployer/law firm | Partner | | |
| | ochridge & Kilgore | Law firm of contributor's spouse (if any) | | |
| | a child, law firm of parent(s) (if any) | | | |
| Date | | | Amount of | In-kind contribution |
| Date | Full name of contributor out-of-state PAC (ID#: | | contribution (\$) | description(if applicable) |
| | Leslie Lemon | | | \ |
| 1/9/2010 | Contributor address; City; State; Zip Code | | 250.00 | ! ! |
| | 2523 Winsted Ln. | | | l I |
| | Austin, TX 78703 | ĺ | (If travel outside | of Texas, complete Schedule T) |
| Contributor's pr Retired | incipal occupation | Contributor's job t | itle | |
| Contríbutor's er Retired | nployer/law firm | Law firm of contrib | outor's spouse (if any | y) |
| If contributor is | a child, law firm of parent(s) (if any) | | | |
| | | | | |

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POLITICAL EXPENDITURES SCHEDULE F 1 Total pages Schedule F: The Instruction Guide explains how to complete this form. 1 of 7 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME 00065943 Amy Meachum Date Payee name Amount (\$) **GNI Strategies** City; State; Zip Code 6 Payee address: 1/14/2010 2365.00 908 E. 5th Street, Ste 114 Austin, TX 78702 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· tion required.) Candidate / Officeholder name Office held Cotnract Campaign Work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) **April Shapley** Payee address; City; State; Zip Code 1/14/2010 130.00 8905 Bluegrass Drive Austin, TX 78759 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · · tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name **Amount** (\$) Austin Lytle City; State; Zip Code Payee address; 1/14/2010 1000.00 3816 S. Lamar #3610 Austin, TX 78745 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· tion required.) Office held Candidate / Officeholder name Office sought Contract campaign work (If travel outside of Texas, complete Schedule T) Date Pavee name Amount (\$) Karen Snider Payee address: City; State; Zip Code 1/14/2010 297.00 1401 Hartford St. #1 Austin, TX 78703 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

(512) 463-5800 P.O. Box 12070 POLITICAL EXPENDITURES SCHEDULE F 1 Total pages Schedule F: The Instruction Guide explains how to complete this form. 2 of 7 ACCOUNT # (Ethics Commission filers) 2 FILER NAME 00065943 Amy Meachum Date Payee name Amount (\$) Tanya Elizabeth Gripton 6 Payee address; City; State; Zip Code 1/14/2010 234.00 3018 S 1st St #215 Austin, TX 78704 Purpose of payment (See instructions regarding type of informa-• Complete if direct expenditure to benefit C/OH •• tion required.) Candidate / Officeholder name Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Amount Pavee name (\$) Janine Blackwelder Payee address; City; State; Zip Code 1/14/2010 407.25 8913 Barons Court Austin, TX 78754 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) Guy Anthony Payee address; City; State; Zip Code 1/14/2010 393.75 514 Greenlawn Blvd. Round Rock, TX 78664 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · · Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) Hispanic Scholarship Consortium City; State; Zip Code Payee address; 1/12/2010 150.00 5128 Ganymede Dr. Austin, TX 78727 Purpose of payment (See instructions regarding type of informa-.. Complete if direct expenditure to benefit C/OH ... tion required.) Candidate / Officeholder name Office sought Office held Sponsorship of LULAC Council 650 Scholarship Event (If travel outside of Texas, complete Schedule T) ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES SCHEDULE F Total pages Schedule F: The Instruction Guide explains how to complete this form. 3 of 7 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Amy Meachum 00065943 Date Payee name 7 Amount (\$) Paddington Media 6 Payee address; City; State; Zip Code 1/12/2010 156.25 504 West 7th Street, Suite B Austin, TX 78701 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· tion required.) Candidate / Officeholder name Office sought Office held Website and email design (If travel outside of Texas, complete Schedule T) Date · Payee name Amount (\$) RYLO Consulting Payee address: City; State; Zip Code 1/8/2010 2000.00 908 E. 5th Street, Ste 201 Austin, TX 78702 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · tion required.) Candidate / Officeholder name Office sought Office held Consulting Fee - January (if travel outside of Texas, complete Schedule T) Date Pavee name Amount (\$) Travis County Democratic Party Payee address; City; State; Zip Code 1/4/2010 1500.00 1311 East 6th Street Austin, TX 78702 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · · tion required.) Candidate / Officenolder name Office sought Office held Filing Fee (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) **GNI Strategies** City; State; Zip Code Payee address; 1/4/2010 304.00 908 E. 5th Street, Ste 114 Austin, TX 78702 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· tion required.) Candidate / Officeholder name Office sought Office held Reimbursement for contract work for Guy Anthony (If travel outside of Texas, complete Schedule T) ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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| | POLITI | CAL EXPENDITURES | | | SCHEDULE F |
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| 2 | FILER NAM Amy Meach | - | ; | 3 ACCOUNT 0006594 | # (Ethics Commission filers) |
| 4 | Date | 5 Payee name | | | 7 Amount |
| | | Tressie Bates | | | (\$) |
| | 1/14/2010 | 6 Payee address; City; State; Zip Code | | | 156.00 |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 1401 Hartford Dr. #1 | | | , |
| | | Austin, TX 78703 | | | |
| 8 | Purpose of pay tion required.) | yment (See instructions regarding type of informa- | 9 •• Complete if dire Candidate / Officeholder name | • | e to benefit C/OH •• Iffice sought Office hel |
| | Contract cam | npaign work | | | |
| | (If travel outside | of Texas, complete Schedule T) | | | · |
| | Date | Payee name | | | Amount (\$) |
| | | Janine Blackwelder | | | . , |
| | 1/4/2010 | Payee address; City; State; Zip Code | | | 236.00 |
| | | 8913 Barons Court | | | |
| | | Austin, TX 78754 | | | |
| | Purpose of pay tion required.) | rment (See instructions regarding type of informa- | Complete if dire Candidate / Officeholder name | | e to benefit C/OH •• ffice sought Office held |
| | Contract cam (If travel outside | npaign work of Texas, complete Schedule T) | | | |
| | Date | Payee name | | | Amount (\$) |
| | | Tanya Elizabeth Gripton | | | (\$) |
| | 1/4/2010 | Payee address; City; State; Zip Code | | | 172.00 |
| | | 3018 S 1st St #215 | | | |
| | | Austin, TX 78704 | | | |
| | Purpose of pay tion required.) | ment (See instructions regarding type of informa- | Complete if dire Candidate / Officeholder name | | e to benefit C/OH •• fice sought Office held |
| | Contract cam | paign work | } | | |
| | (If travel outsid | e of Texas, complete Schedule T) | | | |
| | Date | Payee name | | | Amount (\$) |
| | | Karen Snider | | | (+) |
| | 1/4/2010 | Payee address; City; State; Zip Code | | | 192.00 |
| | | 1401 Hartford St. #1 | | | |
| | | Austin, TX 78703 | | | |
| | Purpose of payi tion required.) | ment (See instructions regarding type of informa- | •• Complete if dire Candidate / Officeholder name | | to benefit C/OH •• fice sought Office held |
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POLITICAL EXPENDITURES SCHEDULE F Total pages Schedule F: The Instruction Guide explains how to complete this form. 5 of 7 2 FILER NAME 3 ACCOUNT# (Ethics Commission filers) 00065943 Amy Meachum Date 5 Payee name Amount (\$) Keith Wimberly City; State; Zip Code 6 Payee address; 1/4/2010 228.00 6207 Linda Ln Austin, TX 78723 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) Alberto De La Torre Payee address; City; State; Zip Code 1/4/2010 80.00 411 West St. Elmo #21 Austin, TX 78745 Purpose of payment (See instructions regarding type of informa-- Complete if direct expenditure to benefit C/OH ... tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) **GNI Strategies** Payee address; City; State; Zip Code 2575.00 1/4/2010 908 E. 5th Street, Ste 114 Austin, TX 78702 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) Austin Lytle Payee address; City; State; Zip Code 1/4/2010 395.00 3816 S. Lamar #3610 Austin, TX 78745 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission

POLITICAL EXPENDITURES SCHEDULE F 1 Total pages Schedule F: The Instruction Guide explains how to complete this form. 6 of 7 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME 00065943 Amy Meachum Date 5 Payee name Amount (\$) Blue Roots Strategies 6 Payee address; City; State; Zip Code 1/4/2010 500.00 PO Box 300053 Austin, TX 78753 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) Checkmark Typesetting Payee address; City; State; Zip Code 1/4/2010 428,67 3217 North IH 35 Austin, TX 78722 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH · tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Date Payee name Amount (\$) Keith Wimberly Payee address; City; State; Zip Code 1/14/2010 99.00 6207 Linda Ln Austin, TX 78723 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) Payee name Amount (\$) Alberto De La Torre City; State; Zip Code Payee address: 1/14/2010 135.00 411 West St. Elmo #21 Austin, TX 78745 Purpose of payment (See instructions regarding type of informa-· Complete if direct expenditure to benefit C/OH ·· tion required.) Candidate / Officeholder name Office sought Office held Contract campaign work (If travel outside of Texas, complete Schedule T) ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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| | The Instructi | | 1 Total pages Schedule F: 7 of 7 | | | |
| 2 | FILER NAME Amy Meachum | | 3 ACCO 0006 | | JNT # (Ethics Commission filers) | |
| 4 | Date 1/21/2010 | 5 Payee name Piryx, Inc. 6 Payee address; City; State; Zip Code | | | 7 Amount (\$) | |
| | | 401 W 15th Street Suite 520 Austin, TX 78701 | | | 433.01 | |
| 8 | Purpose of payment (See instructions regarding type of information required.) 9 •• Complete if direct expenditure to Candidate / Officeholder name Officeho | | | | | e hek |
| | Date | Payee name Gustavo Garza | | | Amount (\$) | |
| | 1/14/2010 | Payee address: City: State: Zip Code 3505 S. Lamar, #2076 Austin, TX 78704 | | | 80.00 | |
| | Purpose of payment (See instructions regarding type of information required.) | | | | | e held |
| | Contract can | npaign work of Texas, complete Schedule T) | | | | |
| | Date | Payee name Payee address; City; State; Zip Code | | | Amount (\$) | |
| Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T) | | | •• Complete if di Candidate / Officeholder nam | | e to benefit C/OH •• fice sought Office | held |
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